

SUMMARY BRIEF

BACKGROUND STATEMENT

The Texas Asthma Control Project (TACP) and the Environmental Protection Agency (EPA) provided funding to the Texas A&M School of Public Health for Integrated Educational Interventions (IEI), a program offering hospital-based asthma education and follow-up home visits with a Promotora. IEI was implemented in Hidalgo County in the Rio Grande Valley near the Texas-Mexico border.



SCHOOL OF PUBLIC HEALTH

EVALUATION OVERVIEW

In addition to strengthening the measurement of program outcomes, a primary focus of the evaluation was to increase the evaluative capacity of IEI. Capacity was improved through the restructuring of assessment tools designed to reduce the documentation burden on families, limit the influence of social desirability on survey responses, and measure changes in asthma management behaviors. This was achieved through item-by-item analysis of assessment tools and a collaborative dialogue among representatives from Texas A&M, TACP, and UNTHSC. Insights gained from qualitative interviews and observational data collected in the first year supplemented the decision-making process.

SUMMARY OF CAPACITY BUILDING PROCESS

Components	Analytic Focus	Evaluation Findings/Results
Examine item-by-item patterns in a preliminary subset of data	To explore patterns of change between baseline and 6-months	<p>Families increased their knowledge of asthma, though the percent of correct responses was high at baseline.</p> <p>IEI participants demonstrated improvements in multiple quality of life dimensions, but the 4-week reference period may lead to information gaps, since the tool was administered every 12 weeks.</p> <p>The Asthma Home Environment and Trigger (AHEAT) checklist appeared to be a useful diagnostic tool, but does not function well as an evaluative tool to measure changes made in the home environment.</p>
Collaborative review and revision among TACP, UNTHSC, and Texas A&M representatives	To determine ways to consolidate the number of assessment items and improve the assessment of behavioral changes made by participating families	<p>The team elected to retain the use of the Children's Health Survey for Asthma (CHSA) since it is well validated, assesses triggers, and measures several key outcomes.</p> <p>The team created pre- and post- versions of a second tool that included modified items from the knowledge and exit surveys, and additional items that assessed specific behavioral indicators aligned with the seven principles of healthy homes.</p> <p>The modified behavior change items will measure both desirable (dusting living and sleeping areas) and undesirable behaviors (smoked cigarettes or cigars) with time period references appropriate for each activity. The knowledge items were modified from a true/false format to a Likert-style response set in order to promote more variability and improve the likelihood of measuring small changes.</p>